2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

FILED Apr 24, 2008 08:00 AN Secretary of State DOCUMENT # P02000101707 1. Entity Name THE PIANO GROUP, INC. Principal Place of Business Mailing Address 6809 15TH AVE. DR. W. 6809 15TH AVE. DR. W. **BRADENTON FL 34209 BRADENTON FL 34209** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apl. #, etc Suite Apt #, etc. 1st MOORE CR2E034 (10/07) City & State City & State 4. FEI Number Applied For 16-1633892 Not Applicable ZiD Country $Z_{i}p$ Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WICKMAN & WYCKOFF, P.A. Street Address (P.O. Box Number is Not Acceptable) 4909 MANATEE AVE WEST **BRADENTON FL 34209** City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed harm of registried agent airrittle Turplicable. ffvOTE. Registradd Agor't eignature required when rollematic gi DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2008 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Dalete Change Addition THE TITLE NAME WHITE, LAWRENCE A NAME U00000920078 6809 15TH AVE DR W STREET ADDRESS STREET ADDRESS 05/14/08-80027-023 150.00 **BRADENTON FL 34209** CITY-ST-ZIP CITY-ST-ZIP TITLE TSV Defete Change Addition NAME WHITE, ALICE J NAME STREET ADDRESS 6809 15TH AVE DR W STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34209** CITY-ST-ZIP TITLE ☐ Defete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP TITLE Deiete TITLE Change Addition HAME ПМАИГ STREET ADDRESS STREET ADDRESS CHY-SI-ZIP CITY-SI-AP TITLE ☐ De-ete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-7IP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachmen with an address, with all other like empowered.

Dayuna France #